

Instructions For use when the Proposed Insured (and the Policy Owner, if different) is not a U.S. citizen or gre	een card holder	r.
Client Name:		
Client will be: (check all that apply) ☐ Proposed Insured ☐ Policy Owner		
Agency Name/Producer: Date	:	
Section 1—Eligibility		
 All of the following criteria are required in order to be considered for coverage. I have verified that m fulfills these requirements: 	ny client □ Yes	□ No
The client:		
is between the ages of 18 and 80. In a siting resident of any an approved according (Occupation (Occupation 5)).		
 is a citizen/resident of one or more approved countries (See section 5). is NOT a(n): elected official, trade union official, public figure, missionary, foreign military persor 	anol	
 is NOT a(n). elected official, trade diffor official, public figure, missionary, foreign military person member of the diplomatic corps, judicial/law enforcement personnel, other high profile occupation. will provide a SSN, ITIN/TIN or a completed W-8BEN at the time of application. 		
Section 2—Nexus Verification: proof of time spent in the U.S. and economic con U.S. LLC/U.S. Trust cannot be established for nexus purposes only. Nexus assets cannot be established of qualifying for U.S. life insurance.	ed for the sole pu	ırpose
2a. Has the client been present in the United States for at least 15 days in the preceding 12 months?2b. Does the client have at least one of the financial connections listed below? (check ALL that apply)	☐ Yes	
	☐ Yes	□ No
☐ U.S. residence or significant property interests, which is/are owned by:☐ Client☐ U.S. LLC☐ U.S. Trust☐ Other:		
☐ U.S. bank or brokerage account(s), open for at least the past six months with a minimum balance		
\$100,000 (Net of 1st year planned premium), which is/are owned by:	5 01	
☐ Client ☐ U.S. LLC ☐ U.S. Trust ☐ Other:		
☐ Primary employment in the U.S.		
Owner of an established foreign company actively engaged in business for the past 12 months. Comes to the U.S. to transact business.	Owner	
\square Documented status as a full-time student at a U.S. university, living full-time in the U.S.		
☐ Lessee spending significant time in the U.S. under an active housing rental agreement of at least year. (Copy of the signed agreement to be submitted.)	t one	
☐ Client's spouse has nexus to the U.S. and is applying for Lincoln life insurance currently, or has purchased a Lincoln life insurance policy within the last 6 months. (Maximum face equal to spous Lincoln coverage up to \$10 million.)	se's	
2c. Were nexus assets established for a reason other than qualifying for U.S. life insurance?	☐ Yes	□ No
2d. If assets are owned by a U.S. entity, will you provide evidence that there is a link to the client?	☐ Yes	□ No
2e. I will provide supporting documentation (statements, etc.) with the formal application to verify the U.S.	nexus. \square Yes	□ No
Section 3—Situs Verification		
3a. In which U.S. state will the solicitation take place?		
3b. Does the client have a nexus to the state of solicitation? (See section 2b.)	☐ Yes	□ No
3c. If answer to 3b. is "No", why has the client come to this state?		

Se	ction 4—Policy Ownership		
ŀa.	I confirm that the policy will NOT be owned by a foreign entity.	☐ Yes	□ No
ŀb.	How will the policy be owned? (Please answer corresponding questions.)		
	☐ Insured will own the policy		
	☐ Family member will own the policy		
	If the family member is not a U.S. citizen or green card holder, will you provide a separate Pre-Submission Worksheet for this individual?	☐ Yes	□ No
	☐ U.S. Business will own the policy		
	Can you confirm that a foreign entity does not have direct or indirect beneficial ownership?	\square Yes	□No
	Will you provide proof of the insured's business interest?	☐ Yes	□ No
	☐ U.S. Trust will own the policy		
	Can you confirm that a foreign entity does not have direct or indirect beneficial ownership?	☐ Yes	□No
	Will you provide the trust document, a list of assets and the identities of the beneficial owners?	☐ Yes	□No
	☐ U.S. LLC will own the policy		
	Can you confirm that a foreign entity does not have direct or indirect beneficial ownership?	☐ Yes	□ No
	Will you provide the operating agreement and a list of assets?	☐ Yes	□ No
	If manager/member is not a U.S. citizen, will you provide a separate Pre-Submission Worksheet for this individual?	☐ Yes	□ No

Section 5—List of Approved Countries

American Samoa Andorra Anguilla Antigua Argentina Aruba Australia Austria Bahamas Barbados Belgium Belize Bermuda	Cook Islands Costa Rica Curacao Cyprus Czech Republic Denmark Dominica Dominican Republic Ecuador* Estonia Falkland Islands Finland France	Hong Kong Hungary Iceland India* Ireland Israel* Italy Jamaica Japan Kuwait Latvia Liechtenstein Lithuania	Monaco Montenegro Montserrat Morocco Netherlands Netherlands Antilles New Caledonia New Zealand Northern Mariana Islands Norway Panama Paraguay	Saint Lucia Saint Vincent & the Grenadines San Marino Singapore Slovakia South Korea Spain Sweden Switzerland Taiwan Trinidad & Tobago Turkey*
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Bahamas	Ecuador*	Japan	Northern Mariana	Sweden
Barbados	Estonia	Kuwait	Islands	Switzerland
Belgium	Falkland Islands	Latvia	Norway	Taiwan
Belize	Finland	Liechtenstein	Panama	Trinidad & Tobago
Bermuda	France	Lithuania	Paraguay	Turkey*
Brazil	French Guiana	Luxembourg	Peru	Turks and Caicos
Brunei	French Polynesia	Macau	Philippines*	United Arab Emirates
Bulgaria	Germany	Malta	Poland	United Kingdom
Canada	Greece	Marshall islands	Portugal	Uruguay
Canary Islands	Greenland	Martinique	Romania	Vatican City
Cayman Islands	Grenada	Mexico	Saint Kitts and Nevis	Virgin Islands
Chile	Guadeloupe			
China*	-			

^{*}Residence only in certain cities or regions will be acceptable as follows:

China – residence in Beijing, Chongqing, Guangzhou, Shanghai, Shenyang, and Tianjin

Ecuador – Quito only

India – residence in Bangalore, Calcutta, Chennai, Delhi, Hyderabad, Mangalore, Mumbai and Surat

Israel - residence in any part of Israel, except the West Bank and Gaza Strip

Philippines – residence in Manila

Turkey – residence in Istanbul and Ankara

Please note: Foreign travel and/or residency in designated high-risk areas of certain countries may be uninsurable.